

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF PUERTO RICO

MARIANO MALDONADO-PAGAN

Petitioner,

v.

SR. MALAVE, WARDEN, BAYAMON
CORRECTIONAL FACILITY

Respondent.

CIVIL NO. 98-2383 (RLA)

ORDER TO SHOW CAUSE AND DIRECTING ATTORNEY GENERAL
TO ANSWER 28 U.S.C. § 2254 PETITION

It appearing that the Federal Litigation Division of the Department of Justice, Commonwealth of Puerto Rico was served on August 24, 2001,¹ with copy of the petition in this action along with a copy of the Court's Order directing it to answer same², and

It further appearing that neither Respondent nor the Attorney General have answered the petition to date, it is

HEREBY ORDERED that unless the Attorney General and/or Respondent file an Answer or otherwise show cause **on or before October 30, 2001**, sanctions shall be imposed, including but not limited to the striking of defenses or the imposition of economic sanctions.

¹ See Appendix 1.

² See Order Directing Counsel to Continue to Represent Defendant (docket No. 25, filed on May 21, 2001).

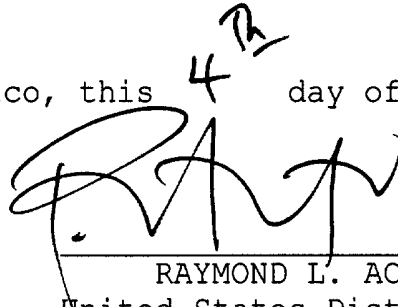
CIVIL NO. 98-2383 (RLA)

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1 This Order shall be notified to the WARDEN of the BAYAMON
2 CORRECTIONAL FACILITY, to the ATTORNEY GENERAL of the Commonwealth of
3 Puerto Rico, to petitioner MARIANO MALDONADO PAGAN, **Box 60700 Unit**
4 **5B, Bayamón Correctional Facility, Bayamón, P.R. 00960** and to JUAN M.
5 MASINI SOLER, ESQ., L&M Building, Suite B, #14 O'Neill Street, San
6 Juan, P.R. 00918.

7 IT IS SO ORDERED.

8 In San Juan, Puerto Rico, this ^{4th} day of October, 2001.

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12 RAYMOND L. ACOSTA
United States District Judge

**U.S. Post
CERTIFIED**
(Domestic Mail)

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Attorney General Humbel Rodriguez
Federal Litigation Div
P.O. Box 9020192
San Juan, PR 00902

2. Article Number (Copy from service label)

7001 0320 0003 6365 8352

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

Received by (Please Print Clearly) **AUG 24 2001**

C. Signature

X

☐ Agent☐ Addressee

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

Postage \$ 1.64

Certified Fee 2.10

Return Receipt Fee
(Endorsement Required)Restricted Delivery Fee
(Endorsement Required)Postmark
here

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Juan Masini Soler
L and M Building
Suite B
14 O'Neill St
San Juan, PR 00902

2. Article Number (Copy from service label)

7001 0320 0003 6365 8374

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

C. Signature

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Agent☐ Addressee☐ Yes☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes
**U.S. Post
CERTIFIED**
(Domestic Mail)
Post
CertifiedReturn Receipt
(Endorsement Required)Restricted Delivery
(Endorsement Required)

Total Postage & Fees \$

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, January 2001

See Reverse for instructions